

ANDERSON EXHIBIT 6N

354. Because of the DEFENDANTS' conduct as set forth in this Count, the UNITED STATES suffered actual damages recoverable under state statutes in excess of One Million Dollars (\$1,000,000), all in violation of 31 U.S.C. §3729(a)(3).

REQUESTS FOR RELIEF

355. WHEREFORE, the Relator, on behalf of the UNITED STATES, demands that judgment be entered in its favor and against DEFENDANTS: ABBOTT LABORATORIES, INC.; ALPHARMA, INC.; ALPHARMA USPD, INC. f/k/a BARRE-NATIONAL, INC.; APOTHECON, INC.; AVENTIS PHARMACEUTICALS, INC.; AVENTIS BEHRING LLC; BARR LABORATORIES, INC.; BARR PHARMACEUTICALS, INC.; BARRE PARENT CORP.; BOEHRINGER INGELHEIM, CORP.; BOEHRINGER INGELHEIM PHARMACEUTICALS, INC.; BOEHRINGER INGELHEIM INTERNATIONAL GmbH; BOEHRINGER INGELHEIM AUSLANDBETEILIGUNGS GmbH; BRISTOL-MYERS SQUIBB COMPANY; C.H. BOEHRINGER SOHN; DEY, INC.; DURAMED RESEARCH, INC.; EM PHARMA, INC.; EMD PHARMACEUTICALS, INC.; ETHEX CORPORATION; GENEVA PHARMACEUTICALS, INC.; GLAXO WELLCOME, INC.; GLAXOSMITHKLINE PLC; HARVARD DRUG GROUP, LLC; HOECHST MARION ROUSSEL, INC.; HOSPIRA, INC. IVAX CORPORATION; IVAX PHARMACEUTICALS, INC.; KV PHARMACEUTICAL COMPANY; LIPHA, S.A.; MAJOR PHARMACEUTICALS; MERCK-LIPHA, S.A.; MERCK KGaA; MYLAN PHARMACEUTICALS, INC.; MYLAN LABORATORIES, INC.; PAR PHARMACEUTICAL COMPANIES, INC.; PAR PHARMACEUTICALS, INC.; PHARMA-

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INVESTMENT LIMITED; PURDUE PHARMA L.P.; PURDUE PHARMA, INC.; PURDUE FREDERICK COMPANY; PUREPAC PHARMACEUTICAL CO.; QUALITEST PHARMACEUTICALS, INC.; ROXANE LABORATORIES, INC.; SANDOZ, INC.; SCHEIN PHARMACEUTICAL, INC.; SCHERING CORPORATION; SCHERING-PLOUGH CORP.; SMITHKLINE BEECHAM CORP.; TEVA PHARMACEUTICALS, USA; UDL LABORATORIES, INC.; WARRICK PHARMACEUTICALS CORP.; WATSON PHARMACEUTICALS, INC.; WATSON LABORATORIES; and ZENITH GOLDLINE PHARMACEUTICALS, INC., with judgment to be entered against each DEFENDANT for the amount of damages: (1) to the States' Medicaid Programs arising (a) from claims for each DEFENDANT'S respective specified drugs and (b) jointly and severally with such other Defendants for damages as set forth in paragraphs 134 through 136 herein; and (2) to the Medicare Program arising from claims for those drugs classified under the HCPCS codes covering their specified drugs, and jointly and severally with such other Defendants whose drugs fall under said HCPCS codes, as follows:

356. On Count I (False Claims Act; Causing Presentation of False or Fraudulent Claims) for triple the amount of the UNITED STATES' damages, plus civil penalties of no more than ELEVEN THOUSAND DOLLARS (\$11,000.00) and no less than FIVE THOUSAND FIVE HUNDRED DOLLARS (\$5,500.00) for each false claim;

357. On Count II (False Claims Act; Causing a False Record or Statement To Be Made or Used to get a False or Fraudulent Claim Paid or Approved by the Government) for triple the amount of UNITED STATES' damages plus civil penalties of no more than

ELEVEN THOUSAND DOLLARS (\$11,000.00) and no less than FIVE THOUSAND FIVE HUNDRED DOLLARS (\$5,500.00) for each false statement;

358. On Count III (False Claims Act; Causing False Records Or Statements To Be Used To Conceal An Obligation To Pay Money To The Government) for triple the amount of the UNITED STATES' damages plus civil penalties of no more than ELEVEN THOUSAND DOLLARS (\$11,000.00) and no less than FIVE THOUSAND FIVE HUNDRED DOLLARS (\$5,500.00) for each false or fraudulent claim paid;

359. On Count IV (False Claims Act; Causing Presentation of False or Fraudulent Claims; Causing a False Record or Statement to be Made or Used to Get a False or Fraudulent Claim Paid or Approved by the Government; Illegal Remuneration) for triple the amount of the UNITED STATES' damages, plus civil penalties of no more than ELEVEN THOUSAND DOLLARS (\$11,000.00) and no less than FIVE THOUSAND FIVE HUNDRED DOLLARS (\$5,500.00) for each false claim;

360. On Count V (False Claims Act; Causing Presentation Of False or Fraudulent Claims; Prohibited Referrals, Claims and Compensation Arrangements) for triple the amount of the UNITED STATES' damages, plus civil penalties of no more than ELEVEN THOUSAND DOLLARS (\$11,000.00) and no less than FIVE THOUSAND FIVE HUNDRED DOLLARS (\$5,500.00) for each false statement;

361. On Count VI (False Claims Act; Conspiring To Defraud The Government By Getting A False Or Fraudulent Claim Allowed Or Paid; J-Code/Physician Services) for triple the amount of the UNITED STATES' and States' damages, plus civil penalties of no more

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than ELEVEN THOUSAND DOLLARS (\$11,000.00) and no less than FIVE THOUSAND FIVE HUNDRED DOLLARS (\$5,500.00) for each false record or statement.

362. On Count VII (False Claims Act; Conspiring To Defraud The Government By Getting A False Or Fraudulent Claim Allowed Or Paid; Hub and Spoke Conspiracy) for triple the amount of the UNITED STATES' and States' damages, plus civil penalties of no more than ELEVEN THOUSAND DOLLARS (\$11,000.00) and no less than FIVE THOUSAND FIVE HUNDRED DOLLARS (\$5,500.00) for each false record or statement.

363. On Count VIII (False Claims Act; Rebate Defendants Making, Using Or Causing To Be Made Or Used, A False Record Or Statement To Get A False Or Fraudulent Claim Paid Or Approved By The Government) (only as to DEFENDANTS DEY, INC.; PURDUE PHARMA, L.P.; PURDUE FREDERICK COMPANY and SCHEIN PHARMACEUTICAL, INC.) for triple the amount of the UNITED STATES' damages, plus civil penalties of no more than ELEVEN THOUSAND DOLLARS (\$11,000.00) and no less than FIVE THOUSAND FIVE HUNDRED DOLLARS (\$5,500.00) for each false statement;

364. On Count IX (False Claims Act; Rebate Defendants Making, Using Or Causing To Be Made Or Used, A False Record Or Statement To Conceal, Avoid Or Decrease An Obligation To Pay Or Transmit Money Or Property To The Government) (only as to DEFENDANTS DEY, INC.; PURDUE PHARMA, L.P.; PURDUE FREDERICK COMPANY and SCHEIN PHARMACEUTICAL, INC.) for triple the amount of the UNITED STATES' damages, plus civil penalties of no more than ELEVEN THOUSAND DOLLARS

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(\$11,000.00) and no less than FIVE THOUSAND FIVE HUNDRED DOLLARS (\$5,500.00) for each false statement; and

365. On Count X (False Claims Act; False Claims Under State Law Arising From Same Transaction or Occurrence as Brought in This False Claims Action) for damages encompassing the States' shares of the Medicaid funds at issue, together with such additional damages, penalties and other relief as may be available under applicable law for each false record or statement.

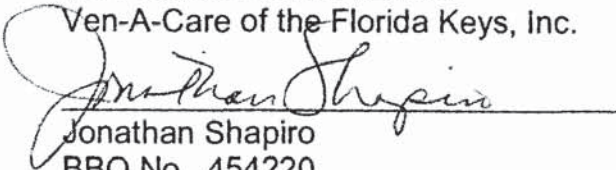
Further, the Relator, on its behalf, requests that it receive the maximum amount as permitted by law, of the proceeds of this action or settlement of this action collected by the UNITED STATES, plus an amount for reasonable expenses incurred, plus reasonable attorneys' fees and costs of this action. The Relator requests that its award be based upon the total value recovered, both tangible and intangible, including any amounts received from individuals or entities not parties to this action.

DEMAND FOR JURY TRIAL

A jury trial is demanded in this case.

Dated: February 15, 2005

Respectfully submitted,
Attorneys for
the Private Person Plaintiff,
Ven-A-Care of the Florida Keys, Inc.


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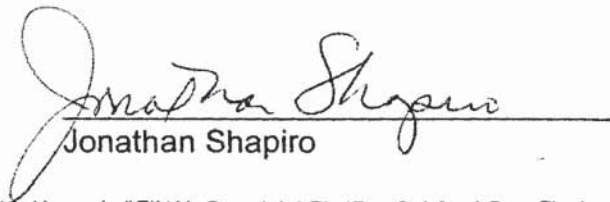
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CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this 15th day of February, 2005, I caused an original and a copy of this Third Amended Complaint to be filed under seal and in camera for sixty (60) days and not to be served on the Defendants named herein or until further order of this Honorable Court.

I HEREBY CERTIFY that prior to this 15th day of February, 2005, I caused a copy of this Third Amended Complaint and written disclosure of substantially all material evidence and information the Relator, VEN-A-CARE possesses to be served on the Government pursuant to Rule 4(i)(1)(A) and (B), Fed.R.Civ.P., prior to the filing of this Third Amended Complaint by delivering a copy of the Third Amended Complaint, material evidence and information to the United States Attorney for the District of Massachusetts, and by sending a copy of the Third Amended Complaint, material evidence and information by Certified Mail, Return Receipt Requested, to the Attorney General of the United States in Washington, D.C.


Jonathan Shapiro

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EXHIBIT "1"

EXHIBIT "1"
PRICE FRAUD DRUGS
BILLED THROUGH MEDICAID

Volume 1 - page 1

Defendant	Drug	NDC #	Type of Drug
Abbott	E.E.S. 200 Susp. 100 ml	00074-6306-13	Oral
Abbott	E.E.S. 200 Liq 200 Mg/5 ml	00074-6306-16	Oral
Abbott	E.E.S. 400 Liq 400 Mg/5 ml	00074-6373-16	Oral
Abbott	E.E.S./ sulfisoxazole 200 Mg, 100 ml	00074-7156-13	Oral
Abbott	E.E.S./ sulfisoxazole 200 Mg 150 ml	00074-7156-43	Oral
Abbott	E.E.S./sulfisoxazole 200 Mg 200 ml	00074-7156-53	Oral
Abbott	Ery-tab E/c Ud 250 Mg 100's	00074-6304-11	Oral
Abbott	Ery-tab E/c 250 Mg 100's	00074-6304-13	Oral
Abbott	Ery-tab E/c 250 Mg 30's	00074-6304-30	Oral
Abbott	Ery-tab 333 mg	00074-6320-11	Oral
Abbott	Ery-tab 333 mg	00074-6320-13	Oral
Abbott	Ery-tab 333 mg	00074-6320-30	Oral
Abbott	Ery-tab 333 mg	00074-6320-53	Oral
Abbott	Ery-tab 500 Mg u	00074-6321-11	Oral
Abbott	Ery-tab 500 Mg e	00074-6321-13	Oral
Abbott	Erythromycin Ethylsuccinate Tab 400 mg	00074-2589-13	Oral

EXHIBIT "1"
PRICE FRAUD DRUGS
BILLED THROUGH MEDICAID

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Defendant	Drug	NDC #	Type of Drug
Abbott	Erythromycin Ethylsuccinate Tab 400 mg	00074-2589-53	Oral
Abbott	Erythromycin Stearate 500 Mg Tab 100's	00074-6316-13	Oral
Abbott	Erythromycin Base 250 Mg Tab 100's	00074-6326-13	Oral
Abbott	Erythromycin Base 250 Mg Tab 500's	00074-6326-53	Oral
Abbott	Erythromycin Stearate 250 Mg Tab 100's	00074-6346-20	Oral
Abbott	Erythromycin Stearate Ud 250 Mg Tab 100's	00074-6346-38	Oral
Abbott	Erythromycin Stearate 250 Mg Tab 500's	00074-6346-53	Oral
Abbott	Isoflurane Vial	00074-3292-01	Inhalant
Abbott	Isoflurane Vial	00074-3292-02	Inhalant
Abbott	Pediazole Susp	00074-8030-13	Oral
Abbott	Pediazole Susp	00074-8030-43	Oral
Abbott	Pediazole Susp	00074-8030-53	Oral
Alpharma	ACETASOL HC SOL 2-1%	00472-0882-82	DROPS
Alpharma	ACETASOL SOL 2%	00472-0880-99	SOLUTION
Alpharma	ACYCLOVIR O/S 200 mg/5 ml	00472-0082-16	ORAL SUSP
Alpharma	ALBUTEROL SUL S 2 mg/5 ml	00472-0825-16	SYRUP
Alpharma	AMANTAD SYRP 50 mg/5 ml	00472-0833-16	SYRUP

EXHIBIT "1"
PRICE FRAUD DRUGS
BILLED THROUGH MEDICAID

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Defendant	Drug	NDC #	Type of Drug
Alpharma	AMINOPH LIQ 105 mg/5 ml	00472-0873-08	LIQUID
Alpharma	APAP+COD SOL 12-120 mg/5	00472-1419-16	ELIXIR
Alpharma	APAP+COD SOL 12-120 mg/5	00472-1419-28	ELIXIR
Alpharma	APAP+COD SOL 12-120 mg/5	00472-1419-04	ELIXIR
Alpharma	BETAMET DIP AUG 0.05%	00472-0382-15	OINT.(GM)
Alpharma	BETAMET DIP AUG 0.05%	00472-0382-45	OINT.(GM)
Alpharma	BETAMET DIP CR 0.05%	00472-0380-15	CREAM(GM)
Alpharma	BETAMET DIP CR 0.05%	00472-0380-45	CREAM(GM)
Alpharma	BETAMET DIP LOT 0.05%	00472-1382-02	LOTION
Alpharma	BETAMET DIP OIN 0.05%	00472-0381-45	OINT.(GM)
Alpharma	BETAMET DIP OIN 0.05%	00472-0381-15	OINT.(GM)
Alpharma	BETAMET VAL CRM 0.1%	00472-0370-15	CREAM(GM)
Alpharma	BETAMET VAL CRM 0.1%	00472-0370-45	CREAM(GM)
Alpharma	BETAMET VAL LOT 0.1%	00472-0372-02	LOTION
Alpharma	BETAMET VAL OIN 0.1%	00472-0371-15	OINT.(GM)
Alpharma	BETAMET VAL OIN 0.1%	00472-0371-45	OINT.(GM)
Alpharma	BROMANATE DC C/	00472-1645-04	SYRUP

EXHIBIT "1"
PRICE FRAUD DRUGS
BILLED THROUGH MEDICAID

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Defendant	Drug	NDC #	Type of Drug
Alpharma	BROMANATE DC C/	00472-1645-28	SYRUP
Alpharma	BROMANATE DC C/	00472-1645-16	SYRUP
Alpharma	BROMANYL COUGH	00472-1634-16	SYRUP
Alpharma	CHLORHEX GLUC O 1.2 mg/ml	00472-0036-16	LIQUID
Alpharma	CHLORPROM CONC 100 mg/ml	00472-0742-98	ORAL CONC.
Alpharma	CIMETID HCL LIQ 300 mg/5 ml	00472-0514-08	LIQUID
Alpharma	CIMETID HCL O/S 300 mg/5 ml	00472-0514-16	LIQUID
Alpharma	CLEMASTINE SYRP 0.67 mg/5 ml	00472-0857-04	SYRUP
Alpharma	CLINDAMY TOP SO 1%	00472-0987-92	SOLUTION
Alpharma	CLINDAMY TOP SO 1%	00472-0987-91	SOLUTION
Alpharma	CLOBETAS PR CR 0.05%	00472-0400-15	CREAM(GM)
Alpharma	CLOBETAS PR CR 0.05%	00472-0400-45	CREAM(GM)
Alpharma	CLOBETAS PR CR 0.05%	00472-0400-30	CREAM(GM)
Alpharma	CLOBETAS PR CR 0.05%	00472-0400-60	CREAM(GM)
Alpharma	CLOBETAS PR OIN 0.05%	00472-0401-30	OINT.(GM)
Alpharma	CLOBETAS PR OIN 0.05%	00472-0401-15	OINT.(GM)
Alpharma	CLOBETAS PR OIN 0.05%	00472-0401-45	OINT.(GM)

EXHIBIT "1"
PRICE FRAUD DRUGS
BILLED THROUGH MEDICAID

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Defendant	Drug	NDC #	Type of Drug
Alpharma	CLOBETAS PR OIN 0.05%	00472-0401-60	OINT.(GM)
Alpharma	CLOBETAS PR SOL 0.05%	00472-0402-25	SOLUTION
Alpharma	CLOBETAS PR SOL 0.05%	00472-0402-50	SOLUTION
Alpharma	CODAMINE SYRP 25-5	00472-0749-16	SYRUP
Alpharma	CONSTULOSE SYR 10 G/15 ml	00472-1358-32	SYRUP
Alpharma	CONSTULOSE SYRP 10 G/15 ml	00472-1358-08	SYRUP
Alpharma	CYPROHEPTAD SYR 2 mg/5 ml	00472-0755-16	SYRUP
Alpharma	DETUSSIN LIQ 60-5 mg/5 ml	00472-0958-16	SOLUTION
Alpharma	DEXAMETH ELIX 0.5 mg/5 ml	00472-0972-08	ELIXIR
Alpharma	DEXAMETH ELIX 0.5mg 5 ml	00472-0972-33	ELIXIR
Alpharma	DIHISTINE DH EL 30-10-2/5	00472-1639-04	LIQUID
Alpharma	DIHISTINE DH EL	00472-1639-28	LIQUID
Alpharma	DIHISTINE DH EL 30-10-2/5	00472-1639-16	LIQUID
Alpharma	DIHISTINE EXP 100-30-10	00472-1640-04	SYRUP
Alpharma	DIHISTINE EXP 100-30-10	00472-1640-16	SYRUP
Alpharma	DYPHYLLINE GG E 100-100/15	00472-1238-16	ELIXIR
Alpharma	ENTAC LIQ	00472-0650-16	LIQUID

EXHIBIT "1"
PRICE FRAUD DRUGS
BILLED THROUGH MEDICAID

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Defendant	Drug	NDC #	Type of Drug
Alpharma	ENULOSE SYRP 10 G/15 ml	00472-1360-16	SYRUP
Alpharma	ENULOSE SYRP 10 G/15 ml	00472-1360-64	SYRUP
Alpharma	ERYTHR EST OS 125 mg/5 ml	00472-0977-16	ORAL SUSP
Alpharma	ERYTHR EST OS 250 mg/5 ml	00472-0979-16	ORAL SUSP
Alpharma	ERYTHR ETH OS 200 mg/5 ml	00472-0971-16	ORAL SUSP
Alpharma	ERYTHR ETH OS 400 mg/5 ml	00472-0974-16	ORAL SUSP
Alpharma	ERYTHR SOL 2%	00472-1244-92	SOLUTION
Alpharma	FLUOCINON CRM 0.05%	00472-3901-60	CREAM(GM)
Alpharma	FLUOCINON CRM 0.05%	00472-3901-15	CREAM(GM)
Alpharma	FLUOCINON CRM 0.05%	00472-3901-30	CREAM(GM)
Alpharma	FLUOCINON SOL 0.05%	00472-0829-02	SOLUTION
Alpharma	GUIATUSS AC SYR 100-10 mg/5	00472-0012-16	SYRUP
Alpharma	GUIATUSS AC SYR 100-10 mg/5	00472-0012-28	SYRUP
Alpharma	GUIATUSS AC SYR 100-10 mg/5	00472-0012-04	SYRUP
Alpharma	GUIATUSS CF SYR	00472-0420-94	SYRUP
Alpharma	GUIATUSS DAC SY 100-30-10	00472-0011-16	SYRUP
Alpharma	HALOP O/S 2MG/ml	00472-0766-99	ORAL CONC.

EXHIBIT "1"
PRICE FRAUD DRUGS
BILLED THROUGH MEDICAID

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Defendant	Drug	NDC #	Type of Drug
Alpharma	HEMORR+HC SUPP 25 mg	00472-0511-24	SUPP.RECT
Alpharma	HEMORR+HC SUPP 25 mg	00472-0511-12	SUPP.RECT
Alpharma	HYCOSIN EXP 100-5/5 ml	00472-0077-16	SYRUP
Alpharma	HYDROCORT CRM 2.5%	00472-0337-16	CREAM(GM)
Alpharma	HYDROCORT CRM 2.5%	00472-0337-30	CREAM(GM)
Alpharma	HYDROCORT CRM 2.5%	00472-0337-20	CREAM(GM)
Alpharma	HYDROMET SYRP	00472-1030-28	SYRUP
Alpharma	HYDROMET SYRP	00472-1030-16	SYRUP
Alpharma	HYDROXYZ SYRP 10 mg/5 ml	00472-0771-16	SYRUP
Alpharma	LACTULOSE SOL 10 G/15 ml	00472-0208-08	SYRUP
Alpharma	LACTULOSE SOL 10 G/15 ml	00472-0208-16	SYRUP
Alpharma	LACTULOSE SOL 10 G/15 ml	00472-0208-32	SYRUP
Alpharma	LIDOCA VISC 2% 20 mg/ml	00472-0996-33	SOLUTION
Alpharma	LINDANE LOT 1%	00472-0570-16	LOTION
Alpharma	LINDANE LOT 1%	00472-0570-02	LOTION
Alpharma	LINDANE LOT 1%	00472-0570-28	LOTION
Alpharma	LINDANE SHAM 1%	00472-0572-02	SHAMPOO
Alpharma	LINDANE SHAM 1%	00472-0572-16	SHAMPOO
Alpharma	LINDANE SHAM 1%	00472-0572-28	SHAMPOO

EXHIBIT "1"
PRICE FRAUD DRUGS
BILLED THROUGH MEDICAID

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Defendant	Drug	NDC #	Type of Drug
Alpharma	METOCLOPR O/S 5 mg/5 ml	00472-0454-16	SOLUTION
Alpharma	NUCOTUSS EXP 200-60-20	00472-1245-16	SYRUP
Alpharma	NUCOTUSS PED EX 100-30-10	00472-1240-16	SYRUP
Alpharma	NYSTATIN CRM 100 MU/G	00472-0163-15	CREAM(GM)
Alpharma	NYSTATIN CRM 100 MU/G	00472-0163-30	CREAM(GM)
Alpharma	NYSTATIN O/S 100 MU/ml	00472-1320-16	ORAL SUSP
Alpharma	NYSTATIN O/S 100 MU/ml	00472-1320-02	ORAL SUSP
Alpharma	NYSTATIN OIN 100 MU/G	00472-0166-30	OINT.(GM)
Alpharma	NYSTATIN OIN 100 MU/G	00472-0166-15	OINT.(GM)
Alpharma	NYSTATIN+TRIAM	00472-0155-30	OINT.(GM)
Alpharma	NYSTATIN+TRIAM	00472-0150-30	CREAM(GM)
Alpharma	NYSTATIN+TRIAM	00472-0155-15	OINT.(GM)
Alpharma	NYSTATIN+TRIAM	00472-0150-60	CREAM(GM)
Alpharma	NYSTATIN+TRIAM	00472-0150-15	CREAM(GM)
Alpharma	NYSTATIN+TRIAM	00472-0155-60	OINT.(GM)
Alpharma	PAREGOR ELIX 2 MG/5 ml	00472-0802-16	LIQUID
Alpharma	PHENADEX PED DR	00472-1142-31	DROPS
Alpharma	PHENOB EL 20 mg/5 ml	00472-1015-16	ELIXIR
Alpharma	PHENOB EL 20 mg/5 ml	00472-1015-28	ELIXIR

EXHIBIT "1"
PRICE FRAUD DRUGS
BILLED THROUGH MEDICAID

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Defendant	Drug	NDC #	Type of Drug
Alpharma	POT CHL LIQ 10% 20 Meq/15 ml	00472-1000-28	LIQUID
Alpharma	POT CHL LIQ 10% 20 Meq/15 ml	00472-1000-16	LIQUID
Alpharma	POT CHL LIQ 20% 40 Meq/15 ml	00472-1001-16	LIQUID
Alpharma	PREDNISOL SYRP 15 mg/5 ml	00472-0212-08	SYRUP
Alpharma	PREDNISOL SYRP 15 mg/5 ml	00472-0212-16	SYRUP
Alpharma	PROMETH SYRP PL 6.25 mg/5 ml	00472-1504-08	SYRUP
Alpharma	PROMETHAZ SYR 6.25 mg/5 ml	00472-1504-16	SYRUP
Alpharma	PROMETHAZ SYRP 6.25 mg/5 ml	00472-1504-04	SYRUP
Alpharma	PROMETHAZ SYRP 6.25 mg/5 ml	00472-1504-28	SYRUP
Alpharma	PROMETHAZ VC SY 5-6.25 mg/5 ml	00472-1628-04	SYRUP
Alpharma	PROMETHAZ VC SY 5-6.25 mg/5 ml	00472-1628-16	SYRUP
Alpharma	PROMETHAZ VC SY 5-6.25/5 ml	00472-1628-28	SYRUP
Alpharma	PROMETHAZ VC+CO 5-10-6.25	00472-1629-04	SYRUP
Alpharma	PROMETHAZ VC+CO	00472-1629-28	SYRUP
Alpharma	PROMETHAZ VC+CO 5-10-6.25	00472-1629-16	SYRUP
Alpharma	PROMETHAZ+COD S 10-6.25/5	00472-1627-04	SYRUP
Alpharma	PROMETHAZ+COD S 10-6.25/5	00472-1627-28	SYRUP

EXHIBIT "1"
PRICE FRAUD DRUGS
BILLED THROUGH MEDICAID

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Defendant	Drug	NDC #	Type of Drug
Alpharma	PROMETHAZ+COD S	00472-1627-16	SYRUP
Alpharma	PROMETHAZ+DEX S 15-6.25/5	00472-1630-16	SYRUP
Alpharma	PROMETHAZ+DEX S 15-6.25/5	00472-1630-28	SYRUP
Alpharma	PROMETHAZ+DEX S 15-6.25/5	00472-1630-04	SYRUP
Alpharma	SULFATRIM PED S 200-40 mg/5	00472-1285-16	ORAL SUSP
Alpharma	SULFATRIM PED S 200-40 mg/5	00472-1285-33	ORAL SUSP
Alpharma	SULFATRIM SUSP 200-40 mg/5	00472-1284-16	ORAL SUSP
Alpharma	THEOLATE LIQ 90-150	00472-1540-16	ELIXIR
Alpharma	THEOPHY ELIX 80 mg/15 ml	00472-1444-16	ELIXIR
Alpharma	THEOPHY ELIX 80 mg/15 ml	00472-1444-28	ELIXIR
Alpharma	THIORID CONC 100 mg/ml	00472-1451-94	ORAL CONC.
Alpharma	TRETINOIN CRM 0.025%	00472-0117-45	CREAM(GM)
Alpharma	TRETINOIN CRM 0.025%	00472-0117-20	CREAM(GM)
Alpharma	TRIAMCIN CRM 0.1%	00472-0301-16	CREAM(GM)
Alpharma	TRIAMCIN CRM 0.1%	00472-0301-05	CREAM(GM)
Alpharma	TRIAMCIN CRM 0.1%	00472-0301-80	CREAM(GM)
Alpharma	TRIAMCIN CRM 0.1%	00472-0301-15	CREAM(GM)

EXHIBIT "1"
PRICE FRAUD DRUGS
BILLED THROUGH MEDICAID

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Defendant	Drug	NDC #	Type of Drug
Alpharma	TRIAMCIN OINT 0.1%	00472-0306-80	OINT.(GM)
Alpharma	TRIAMCIN OINT 0.1%	00472-0306-15	OINT.(GM)
Alpharma	TRIPLE SUL VAG	00472-0700-78	CREAM/APPL
Alpharma	VALPROIC SYRP 250 mg/5 ml	00472-0210-16	SYRUP
Apothecon	Albuterol Inh. Aerosol 17gm	59772-6175-01	Inhalation
Apothecon	Albuterol 17 gram (refill)	59772-6175-02	Inhalation
Apothecon	Amantadine 100 mg 100's	62269-0211-24	Oral
Apothecon	Amantadine 100 mg 500's	62269-0211-29	Oral
Apothecon	Amoxicillin 125 mg, 60s	59772-0035-01	Oral
Apothecon	Amoxicillin 250 mg, 100s	59772-0036-02	Oral
Apothecon	Amoxicillin 250 mg, 500s	59772-0036-04	Oral
Apothecon	Captopril/HCTZ 50 mg - 25 mg 100's	59772-5163-05	Oral
Apothecon	Captopril 12.5mg 100s	59772-7045-01	Oral
Apothecon	Captopril	59772-7045-03	Oral
Apothecon	Captopril	59772-7045-04	Oral
Apothecon	Captopril	59772-7045-05	Oral
Apothecon	Captopril 25mg 100s	59772-7046-01	Oral

EXHIBIT "1"
PRICE FRAUD DRUGS
BILLED THROUGH MEDICAID

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Defendant	Drug	NDC #	Type of Drug
Apothecon	Captopril	59772-7046-02	Oral
Apothecon	Captopril	59772-7046-03	Oral
Apothecon	Captopril	59772-7046-04	Oral
Apothecon	Captopril	59772-7047-03	Oral
Apothecon	Captopril	59772-7047-04	Oral
Apothecon	Captopril	59772-7047-05	Oral
Apothecon	Captopril/ Hydrochlorothiazide	59772-5161-05	Oral
Apothecon	Captopril/ Hydrochlorothiazide	59772-5162-05	Oral
Apothecon	Captopril 100mg 100s	59772-7048-01	Oral
Apothecon	Captopril 50mg 100s	59772-7047-01	Oral
Apothecon	Captopril/HCTZ 25 mg - 15 mg 100's	59772-5160-05	Oral
Apothecon	Cefaclor 125 mg/gm 150 ml	59772-7490-04	Oral
Apothecon	Cefaclor 250mg 100s	59772-7491-04	Oral
Apothecon	Cefaclor 500mg 100s	59772-7494-04	Oral
Apothecon	Cefaclor	59772-7492-02	Oral
Apothecon	Cefaclor	59772-7497-03	Oral
Apothecon	Cefaclor	59772-7497-01	Oral
Apothecon	Cefaclor	59772-7490-02	Oral
Apothecon	Cefaclor	59772-7493-01	Oral
Apothecon	Cefaclor	59772-7493-03	Oral
Apothecon	Cefaclor	59772-7492-04	Oral

EXHIBIT "1"
PRICE FRAUD DRUGS
BILLED THROUGH MEDICAID

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Defendant	Drug	NDC #	Type of Drug
Apothecon	Cefadroxil Capsules 500 mg	59772-7271-07	Oral
Apothecon	Cefadroxil Capsules 500 mg	59772-7271-03	Oral
Apothecon	Cefadroxil 500 mg 100's	59772-7271-04	Oral
Apothecon	Doxycycline 100 mg 50s	59772-0940-01	Oral
Apothecon	Doxycycline 100 mg, 50s	59772-0803-01	Oral
Apothecon	Doxycycline 50 mg, 50s	59772-0808-01	Oral
Apothecon	Doxycycline	59772-0803-02	Oral
Apothecon	Doxycycline	59772-0940-02	Oral
Apothecon	Estradiol Tab 2.0mg 500s	59772-0027-04	Oral
Apothecon	Estradiol Tab 1.0mg 100s	59772-0026-03	Oral
Apothecon	Estradiol Tab 2.0 mg 100s	59772-0027-03	Oral
Apothecon	Estradiol Tab 0.5 mg 100s	59772-0025-03	Oral
Apothecon	Estradiol Tab 1.0 mg 500s	59772-0026-04	Oral
Apothecon	Etodolac 300mg 100s	62269-0360-24	Oral
Apothecon	Etodolac 200 mg 100's	62269-0359-24	Oral
Apothecon	Etodolac	62269-0350-24	Oral
Apothecon	Etodolac	62269-0350-29	Oral